

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>2/23/04</u>		2 Serial/Patent # <u>10/633,032</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input type="checkbox"/>	Filing		\$
<input type="checkbox"/>	Amendment		\$
<input type="checkbox"/>	Extension of Time		\$
<input type="checkbox"/>	Notice of Appeal/Appeal		\$
<input checked="" type="checkbox"/>	Petition	<u>None</u>	<u>11/5/03</u> \$ 130.00
<input type="checkbox"/>	Issue		\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$
<input type="checkbox"/>	Maintenance		\$
<input type="checkbox"/>	Assignment		\$
<input type="checkbox"/>	Other		\$
		7 TOTAL AMOUNT OF REFUND	\$ 130.00
		8 TO BE REFUNDED BY:	
		<input type="checkbox"/> Treasury Check	
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:
<input type="checkbox"/>	Duplicate Payment	,	<u>508 -- 088878</u>
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	<i>PTO lost the papers</i>	
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Paul Shanoski</u>		TITLE: <u>Attorney</u>	
SIGNATURE: <u>Paul Shanoski</u>		PHONE: <u>305-0011</u>	
OFFICE: <u>Office of Petitions</u>		*****	
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: <u>Alma K. Reed</u>		DATE: <u>2/23/04</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B